|  |  |   |                                    |                               |                                       |                                       |            | Α                 | pplication             | or Do    | ocket Num                  | ber                    |  |
|--|--|---|------------------------------------|-------------------------------|---------------------------------------|---------------------------------------|------------|-------------------|------------------------|----------|----------------------------|------------------------|--|
|  | PATENT A                                       | 10/08/18                                  |                                    |                               |                                       |                                       |            |                   |                        |          |                            |                        |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)               |  |   |                                    |                               |                                       |                                       |            | SMALL ENTITY TYPE |                        |          | OTHER THAN<br>SMALL ENTITY |                        |  |
| TOTAL CLAIMS   |  |   | 20                                 | -                             |                                       |                                       | R          | ATE               | FEE                    | ] [      | RATE                       | FEE                    |  |
| FO   | R  |   | NUMBER FILED NUMBE                 |                               |                                       | ER EXTRA                              | BAS        | SIC FEE           | 370.00                 | OR       | BASIC FEE                  | 740.00                 |  |
| TOTAL CHARGEABLE CLAIMS                                      |  |   | 20 minus 20= *                     |                               |                                       |                                       | ×          | \$ 9=             |                        | OR       | X\$18=                     |                        |  |
| INDEPENDENT CLAIMS   |  |   | minus 3 = *                        |                               |                                       |                                       | ×          | 42=               |                        | OR       | X84=                       |                        |  |
| MU   | LTIPLE DEPEN                                   | DENT CLAIM P                              | PRESENT                            |                               |                                       |                                       | +140=      |                   | OR                     | +280=    |                            |                        |  |
| * If   | the difference                                 | in column 1 is                            | r "0" in c                         | olumn 2                       | T(                                    | DTAL                                  |            | OR                | TOTAL                  |          |                            |                        |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) |  |   |                                    |                               |                                       |                                       |            | <b>MALL</b>       | ENTITY                 | OR       | OTHER<br>SMALL             |                        |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                    | HIGH<br>NUM<br>PREVIO<br>PAID | OUSLY                                 | PRESENT<br>EXTRA                      | . R        | ATE               | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
| NDM  | Total  | *   | Minus                              | **                            |                                       | =                                     | ×          | \$ 9=             |                        | OR       | X\$18=                     |                        |  |
| AME  | Independent                                    | *   | Minus                              | ***                           |                                       | =                                     | ×          | 42=               |                        | OR       | X84=                       |                        |  |
|  | FIRST PRESE                                    | NTATION OF M                              | ULTIPLE DEI                        | PENDEN                        | CLAIM                                 |                                       | 1          | 140=              |                        | OR       | +280=                      |                        |  |
|  |  |   |                                    |                               |                                       |                                       | L_         | TOTAL             |                        | OB       | TOTAL                      |                        |  |
|  |  | (Column 1)                                | ADD                                | IT. FEE                       |                                       | J                                     | ADDIT. FEE |                   |                        |          |                            |                        |  |
| MENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                    | HIGH<br>NUM<br>PREVI          | mn 2)<br>HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                      | F          | ATE               | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
| NO P   | Total  | *   | Minus                              | **                            |                                       | =                                     | X          | \$ 9=             |                        | OR       | X\$18=                     |                        |  |
| AMEND  | Independent                                    | *   | Minus                              | ***                           |                                       | =                                     |            | (42=              |                        | OR       | X84=                       |                        |  |
| Ľ  | FIRST PRESENTATION OF MOETIFEE DEFENDENT CLAIM |   |                                    |                               |                                       |                                       |            | 140=              |                        | OR       | +280=                      |                        |  |
|  | BE   | EST AVA                                   | ILABLE                             | CC                            | PY                                    |                                       | ADE        | TOTAL             |                        | OR       | TOTAL<br>ADDIT. FEE        |                        |  |
|  |  | (Column 1)                                |                                    | (Colu                         | mn 2)                                 | (Column 3)                            |            |                   |                        | _        |                            |                        |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                    | NUN<br>PREVI                  | HEST<br>MBER<br>OUSLY<br>FOR          | PRESENT<br>EXTRA                      | F          | ATE               | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAI<br>FEE |  |
| NDN  | Total  | *   | Minus                              | **                            |                                       | =                                     | ] [×       | \$ 9=             |                        | OR       | X\$18=                     |                        |  |
| AME  | Independent                                    | *   | Minus                              | ***                           |                                       | =                                     |            | 42=               |                        | OR       | X84=                       |                        |  |
|  | FIRST PRESENTATION OF MOLTIPLE DEPENDENT CLAIM |   |                                    |                               |                                       |                                       |            |                   |                        | 1        | +280=                      |                        |  |
|  | If the entry in colu                           | mn 1 is less than                         | the entry in col                   | umn 2, wrii                   | te "0" in co                          | olumn 3.                              |            | 140=<br>TOTAL     | <del> </del>           | OR       | TOTAL                      |                        |  |
| **   | If the "Highest Nu<br>*If the "Highest Nu      | mber Previously I                         | Paid For" IN TH<br>Paid For" IN TH | IS SPACE                      | is less that is less that             | an 20, enter "20.<br>an 3, enter "3." |            | IT. FEE           | <u> </u>               | JOR      | ADDIT. FEE                 |                        |  |
| 1  | The "Highest Nur                               | nber Previously P                         | aid For" (Total o                  | or Independ                   | dent) is the                          | e nignest numbe                       | er tound   | n the a           | opropriate bo          | ox in co | วเนตก์ 1.                  |                        |  |

## ST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

|                                  | · · · · · · · · · · · · · · · · · · · | CLAIMS AS                           | FILED -         | PART I                           |              | · ;              |          | SMALL EN       | ITITY           |        | OTHER          |              |
|----------------------------------|---------------------------------------|-------------------------------------|-----------------|----------------------------------|--------------|------------------|----------|----------------|-----------------|--------|----------------|--------------|
|                                  |                                       |                                     | (Column         | 1)                               | (Column      | 2)               |          | TYPE [         |                 | OR     | SMALL          | ENTITY       |
| TO                               | TAL CLAIMS                            |                                     | •               | 7                                |              |                  |          | RATE           | FEE             |        | RATE           | FEE          |
| FOF                              |                                       |                                     | NUMBER FILED    |                                  | NUMBER EXTRA |                  |          | BASIC FEE      | 370.00          | OR     | BASIC FEE      | 740.00       |
| TOT                              | AL CHARGEA                            | BLE CLAIMS                          | mi              | nus 20= *                        |              |                  |          | X\$ 9=         |                 | OR     | X\$18=         | ;            |
| INDEPENDENT CLAIMS minus 3 =     |                                       |                                     |                 |                                  |              |                  |          | X42=           |                 | OR     | X84=           |              |
| MULTIPLE DEPENDENT CLAIM PRESENT |                                       |                                     |                 |                                  |              |                  |          |                |                 |        | +280=          |              |
|                                  | 1                                     | in a clump 4 is                     | loss than 7     | oro ontor "                      | O" in colu   | 2                |          | +140=          |                 | OR     |                |              |
| ' IT I                           | 1                                     | in column 1 is                      | • •             |                                  |              | 111111 &         |          | TOTAL          |                 | ОН     | TOTAL          | THAN         |
| (                                | ( CI                                  | _AIMS AS A                          | MENDE           | Columi(                          |              | olumn 3)         |          | SMALL          | ENTITY          | OR     | OTHER<br>SMALL |              |
|                                  |                                       | (Column 1)<br>CLAIMS                |                 | HIGHE                            | ST           | RESENT           |          |                | ADDI-           |        |                | ADD          |
| A I                              |                                       | REMAINING<br>AFTER                  |                 | PREVIOL                          | JSLY         | EXTRA            | ŀ        | RATE           | TIONAL<br>FEE   |        | RATE           | TION/<br>FEE |
| ME                               | Total                                 | * O                                 | Minus           | +20                              | =            | 1                |          | X\$ 9=         | 19              | OR     | X\$18=         |              |
| AMENDMEN                         | Independent                           | . 2                                 | Minus           | *** 2                            | =            | 1                |          | X42=           |                 | OR     | <b>X</b> 84=   |              |
| <b></b>                          | FIRST PRESE                           | NTATION OF M                        | ULTIPLE DE      | PENDENT                          | CLAIM        |                  |          |                |                 |        | +280=-         | _            |
|                                  |                                       |                                     |                 |                                  |              |                  |          | +140=<br>TOTAL |                 | OR     | TOTAL          |              |
|                                  |                                       |                                     |                 |                                  |              |                  |          | ADDIT. FEE     | <u> </u>        | OR     | ADDIT. FEE     |              |
|                                  |                                       | (Column 1)                          | TANKE PARTY NO. | (Colum                           |              | Column 3)        | 7        | <del></del>    | 4851            | T      | <del></del>    | 7 ADD        |
| m                                |                                       | CLAIMS<br>REMAINING                 |                 | NUMB                             | ER I         | PRESENT          |          | RATE           | ADDI-<br>TIONAL |        | RATE           | ADD          |
| ENT                              |                                       | AFTER<br>AMENDMENT                  |                 | PREVIO<br>PAID F                 |              | EXTRA            |          |                | FEE             | -      |                | FEE          |
| MOZ                              | Total                                 | *                                   | Minus           | **                               | =            |                  |          | X\$ 9=         |                 | OR     | X\$18=         | <u> </u>     |
| AMENDMENT                        | Independent                           | •                                   | Minus           | ***                              |              | =                | _        | X42=           |                 | OR     | X84=           |              |
| Q                                | FIRST PRESE                           | NTATION OF M                        | ULTIPLE DE      | PENDENT                          |              |                  |          | +140=          |                 | OR     | +280=          |              |
|                                  |                                       |                                     |                 |                                  | :            |                  |          | TOTAL          |                 | OR     | TOTAL          |              |
|                                  |                                       |                                     |                 |                                  | 6) I         | O-1 O            |          | ADDIT, FEE     | L               | ٠      | ADDIT, FEE     | : L          |
|                                  | TOTAL STATE OF                        | Column 1):<br>Cranu                 |                 | (Celun                           |              | Colymn 3         | <u>-</u> | ·              | 17.7.36         | ·-     |                | ADO          |
| STAC                             |                                       | E FEMALASE<br>E COMPAN<br>E FEMALES |                 | fij prins<br>Ti provi<br>ji palu | or you       | FRICEST<br>CYTEA | !        |                |                 | :<br>: | FATE           | TION<br>FE   |
| AMENDMENT                        | Total                                 | *                                   | Minus           | R/A                              |              | ==               |          | X\$ 9=         | 1               | OF     | X\$18=         |              |
| MEN                              | Independent                           | *                                   | Minus           | ***                              |              | =-               |          | X42=           |                 | OF     | X84=           |              |
| 4                                | FIRST PRESE                           | NTATION OF N                        | MULTIPLE D      | EPENDENT                         | CLAIM        |                  | _        |                |                 | 7      | 000            | 1            |
|                                  | if the entry in colu                  |                                     | • • • •         |                                  |              |                  |          | +140=          |                 | OF     | TOTA           |              |